## FEC FORM

OM - 000001496

Office

Use

Only

## STATEMENT OF ORGANIZATION

RECEIVED FEC MAIL CENTER

2016 JUL 12 AM 10: 33

Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. unter autre de la fille de la 51/LVER STATE QURAL CAMBRIDGE #14126 ADDRESS (number and street) (Check if address is changed) COMMITTEE'S E-MAIL ADDRESS (Check if address MATTHEW. CAPALBY 2g. mail com is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE COO619353 FEC IDENTIFICATION NUMBER IS THIS STATEMENT OR AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Date Signature of Treasurer NOTE: Submission of talse, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 52 U.S.C. §30109.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

For further information contact:

Federal Election Commission

Toll Free 800-424-9530

Local 202-694-1100

**FEC FORM 1** 

(Revised 06/2012)

FEC F	orm 1 (Revised 02/2009)	Page <b>2</b>
_	COMMITTEE	
Candidat	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Compinformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affilia	Office Sought: House Senate President	State' District
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co	mmittee:	
(d)	8 # 1	Democratic, Republican, etc.) Party
Political A	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its con-	nected organization is
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	·
(1)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	gregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, at least one of which is an authorized committee of a federal candidate.	o or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for tw committees/organizations, none of which is an authorized committee of a federal candidate.	o or more political
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number C	
2.	FEC ID number	
3.	FEC ID number C	
4.		

	vised 02/2009)	rage 3
Write or Type Committee	Name	
516	VER STATE RURAL	
	cted Organization, Affiliated Committee, Joint Fundraising Representative, o	r Leadership PAC Spons
	111111111111	
Mailing Address		
		1 1 1 1 1 1 1 1
	OTTY OTATE	7/D 0005
	CITY STATE	ZIP CODE
Relationship: Con	nected Organization [ Affiliated Committee	ve Leadership PAC Sp
tersels.	Send in the second	West .
Mailing Address	3.89.0. C.AMBR. 1. AG. E. 5.7. H.4.2.6.	
	·	891191-
Title or Position	CITY STATE	ZIP CODE
Title or Position	•	
8. Treasurer: List the nat	•	zip code <u>[81/14</u> ]-[27
Treasurer: List the natany designated agent  Evil Name	Telephone number 1912  me and address (phone number optional) of the treasurer of the committee; a	ZIP CODE  LIST - SI/191 - 27  and the name and address
8. Treasurer: List the nar any designated agent  Full Name	me and address (phone number optional) of the treasurer of the committee; a (e.g., assistant treasurer).	ZIP CODE  LIST - SI/191 - 27  and the name and address
8. Treasurer: List the nai any designated agent  Full Name of Treasurer	me and address (phone number optional) of the treasurer of the committee; a (e.g., assistant treasurer).	ZIP CODE  LIST - SI/191 - 27  and the name and address
8. Treasurer: List the nar any designated agent  Full Name of Treasurer	me and address (phone number optional) of the treasurer of the committee; a (e.g., assistant treasurer).	ZIP CODE  LIST - SI/191 - 27  and the name and address

Telephone number 9,2,8-8,4-2,7,8,9

Title or Position

TREASURER

2016 - 07 - 12 - 08 - 0000 - 499

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